

**COMBINED DECLARATION FOR PATENT
APPLICATION AND POWER OF ATTORNEY**
(Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER
22221/1030 (RU-339CIP)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**ENZYMES DERIVED FROM THERMOPHILIC ORGANISMS THAT FUNCTION AS A CHROMOSOMAL
REPLICASE, PREPARATION AND USE THEREOF**

the specification of which (check only one item below):

☐ is attached hereto.

☒ was filed as U.S. Patent Application Serial No. 09/716,964 on November 21, 2000 and was amended on _____
(if applicable).

☐ was filed as PCT International Application No. _____ on _____ and was amended under PCT Article 19 on _____
(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specifications, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

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PRIOR APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (If PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
United States	60/043,202	8-APRIL-1997	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT International filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

120:		U.S. APPLICATIONS		STATUS (Check One)		
U.S. APPLICATION NUMBER		U.S. FILING DATE		PATENTED	PENDING	ABANDONED
09/642,218		August 18, 2000			X	
09/057,416		April 8, 1998				X
PCT APPLICATIONS DESIGNATING THE U.S.						
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Page 1 of 3

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Continue)				ATTORNEY'S DOCKET NUMBER 22221/1030 (RU-339CIP)
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Send Correspondence to: Michael L. Goldman NIXON PEABODY LLP Clinton Square, P.O. Box 31051 Rochester, New York 14603			Direct Telephone Calls to: (name and telephone number) Michael L. Goldman (716) 263-1304	
2 0 1	FULL NAME OF INVENTOR	FAMILY NAME O'Donnell	FIRST GIVEN NAME Michael	SECOND GIVEN NAME E.
	RESIDENCE & CITIZENSHIP	CITY Hastings-on-Hudson	STATE/FOREIGN COUNTRY New York	COUNTRY OF CITIZENSHIP United States
	POST OFFICE ADDRESS	P.O. ADDRESS 16 Maple Lane	CITY Hastings-on-Hudson	STATE & ZIP CODE/CTRY New York 10706/USA
2 0 2	FULL NAME OF INVENTOR	FAMILY NAME Yuzhakov	FIRST GIVEN NAME Alexander	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Malden	STATE/FOREIGN COUNTRY Massachusetts	COUNTRY OF CITIZENSHIP Russia
	POST OFFICE ADDRESS	P.O. ADDRESS 25 Bayrd Street	CITY Malden	STATE & ZIP CODE/CTRY Massachusetts 02148/USA
2 0 3	FULL NAME OF INVENTOR	FAMILY NAME Yurlova	FIRST GIVEN NAME Olga	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY New York	STATE/FOREIGN COUNTRY New York	COUNTRY OF CITIZENSHIP Russia
	POST OFFICE ADDRESS	P.O. ADDRESS 430 East 63 rd Str., Apt. 3G	CITY New York	STATE & ZIP CODE/CTRY New York 10021/USA
2 0 4	FULL NAME OF INVENTOR	FAMILY NAME Jerusalemi	FIRST GIVEN NAME David	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <i>Cambridge</i> <i>New York</i>	STATE/FOREIGN COUNTRY <i>Massachusetts</i>	COUNTRY OF CITIZENSHIP United States
	POST OFFICE ADDRESS	P.O. ADDRESS <i>205 Walden Street</i> <i>1161 York Avenue, Apt. 11M</i>	CITY <i>Cambridge</i> <i>New York</i>	STATE & ZIP CODE/CTRY <i>Massachusetts 02140</i>
2 0 5	FULL NAME OF INVENTOR	FAMILY NAME Bruck	FIRST GIVEN NAME Irina	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY New York	STATE/FOREIGN COUNTRY New York	COUNTRY OF CITIZENSHIP United States
	POST OFFICE ADDRESS	P.O. ADDRESS 1161 York Avenue, Apt. 11M	CITY New York	STATE & ZIP CODE/CTRY New York 10021/USA
2 0 6	FULL NAME OF INVENTOR	FAMILY NAME Kurlyan	FIRST GIVEN NAME John	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Berkeley	STATE/FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP United States
	POST OFFICE ADDRESS	P.O. ADDRESS 936 Oxford Street	CITY Berkeley	STATE & ZIP CODE/CTRY California 94707/USA

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SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE	DATE	DATE
SIGNATURE OF INVENTOR 204 <i>David M. Muzahin</i>	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE 3/11/03	DATE	DATE

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Send Correspondence to: Michael L. Goldman NIXON PEABODY LLP Clinton Square, P.O. Box 31051 Rochester, New York 14603			Direct Telephone Calls to: (name and telephone number) Michael L. Goldman (716) 263-1384	
2 0 1	FULL NAME OF INVENTOR	FAMILY NAME O'Donnell	FIRST GIVEN NAME Michael	SECOND GIVEN NAME E.
	RESIDENCE & CITIZENSHIP	CITY Hastings-on-Hudson	STATE/FOREIGN COUNTRY New York	COUNTRY OF CITIZENSHIP United States
	POST OFFICE ADDRESS	P.O. ADDRESS 16 Maple Lane	CITY Hastings-on-Hudson	STATE & ZIP CODE/CTRY New York 10706/USA
2 0 2	FULL NAME OF INVENTOR	FAMILY NAME Yuzhakov	FIRST GIVEN NAME Alexander	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Malden	STATE/FOREIGN COUNTRY Massachusetts	COUNTRY OF CITIZENSHIP United States (from 11/07/02)
	POST OFFICE ADDRESS	P.O. ADDRESS 25 Bayrd Street	CITY Malden	STATE & ZIP CODE/CTRY Massachusetts 02148/USA
2 0 3	FULL NAME OF INVENTOR	FAMILY NAME Yurieva	FIRST GIVEN NAME Olga	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY New York	STATE/FOREIGN COUNTRY New York	COUNTRY OF CITIZENSHIP Russia
	POST OFFICE ADDRESS	P.O. ADDRESS 430 East 63 rd Str., Apt. 3G	CITY New York	STATE & ZIP CODE/CTRY New York 10021/USA
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2 0 6	FULL NAME OF INVENTOR	FAMILY NAME Kuriyan	FIRST GIVEN NAME John	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Berkeley	STATE/FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP United States
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SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202 <i>S. Lepaud</i>	SIGNATURE OF INVENTOR 203
DATE	DATE 03/12/03	DATE
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE

COMBINED DECLARATION FOR PATENT
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U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED
09/642,218	August 18, 2000		<input checked="" type="checkbox"/>	
09/057,416	April 8, 1998			<input checked="" type="checkbox"/>
PCT APPLICATIONS DESIGNATING THE U.S.				
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)		

**COMBINED DECLARATION FOR PATENT APPLICATION
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NIXON PEABODY LLP
Clinton Square, P.O. Box 31051
Rochester, New York 14603

Direct Telephone Calls to:
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Michael L. Goldman
(716) 263-1304

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	RESIDENCE & CITIZENSHIP	CITY New York	STATE/FOREIGN COUNTRY New York	COUNTRY OF CITIZENSHIP United States
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	RESIDENCE & CITIZENSHIP	CITY New York	STATE/FOREIGN COUNTRY New York	COUNTRY OF CITIZENSHIP United States
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SIGNATURE OF INVENTOR 201

Mike Donald
DATE 2/14/2003

SIGNATURE OF INVENTOR 204

DATE

SIGNATURE OF INVENTOR 202

DATE

SIGNATURE OF INVENTOR 205

[Signature]
DATE 2/14/03

SIGNATURE OF INVENTOR 203

[Signature]
DATE 2/14/03

SIGNATURE OF INVENTOR 206

DATE

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APPLICATION AND POWER OF ATTORNEY
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Rochester, New York 14603

Direct Telephone Calls to:
(name and telephone number)
Michael L. Goldman
(716) 263-1304

201	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE/FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	P.O. ADDRESS	CITY	STATE & ZIP CODE/CTRY
202	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE/FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	P.O. ADDRESS	CITY	STATE & ZIP CODE/CTRY
203	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE/FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
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204	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE/FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	P.O. ADDRESS	CITY	STATE & ZIP CODE/CTRY
205	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE/FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	P.O. ADDRESS	CITY	STATE & ZIP CODE/CTRY
206	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE/FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	P.O. ADDRESS	CITY	STATE & ZIP CODE/CTRY

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DATE	DATE	DATE
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DATE	DATE	DATE 3/10/03

Page 3 of 3